THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) and (b) A high percentage of rabies cases are reported from India. Uncontrolled stray canine population, lack of immunisation and epidemiological surveillance programmes are some of the factors responsible for this.

(c) The Agriculture Ministry is supporting a programme for the Control of Rabies in selected metropolitan cities under a Centrally Sponsored scheme since the Sixth Plan.

Deaths due to Cholera and Gastroenteritis in M.P.

3924. SHRI TRILOKI NATH CHATURVEDI:
DR. MURLI MANOHAR JOSHI:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of persons who have died of cholera and gastroenteritis in Madhya Pradesh during the past six months;

(b) the number of persons who have died in Rewa District in May and June, 1993; and

(c) whether Government have enquired the reasons for the deaths and what follow up action has been taken?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) to (c) According to the State Govt. there were 180 deaths due to gastroenteritis and no death due to cholera during January—June, 1993, out of which 20 deaths due to gastroenteritis were reported from Rewa district during May and June, 1993.

The State Government have taken the following steps to control cholera and gastroenteritis cases:—

(i) Combat teams were set up at district and block level to monitor the situation. Adequate medicines were made available with the combat teams.

(ii) Purification of drinking water was done by putting bleaching powder in wells in chlorine tablets were also distributed for purifying drinking water.

(iii) Distribution of oral rehydration solution in sufficient quantity was made

3925. [*Transferred to 27th August, 1993*]

Supply of substandard medicines to Bombay Municipal Corporation

3926. SHRI H. HANUMANTHAPPA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it has come to the notice of Government that a leading pharmaceutical dealer, who will have a contract for supply of medicines to Bombay Municipal Corporation in the past several years has sold substandard or spurious drugs worth Rs. 3.4 lakhs to as many as 25 civic dispensaries/hospitals during the last few months;

(b) if so, steps taken by Government to contain the substandard drugs being supplied to the BMC and action taken by Government to apprehend the persons;

(c) whether any investigation has been made to apprehend the persons and punish them; and

(d) if not, the reasons thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) Yes, Sir.

(b) and (c) The Food & Drug Administration of Maharashtra carried out raids at various places during April to June, 1993 and seized stocks of spurious drugs from the suppliers. Six persons were arrested in this connection. A complaint has been filed in the Court of Law against the accused persons on 30-6-93, under the provisions of Drugs & Cosmetics Act, 1940 and Rules thereunder.

(d) Does not arise.

Death in Hindu Rao Hospital

3927. DR. NAUNIHAL SINGH:
SHRI NARAIN PRASAD GUPTA;
SHRI SHIV CHARAN SINGH:
SHRI SANGH PRIYA GAUTAM:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that Naresh Jain (24) admitted to Hindu Rao Hospital died swiftly after administering an injection; the details thereof;

(b) whether Government conducted any investigation on the instantaneous death of Naresh Jain under extraordinary circumstances;

(c) if so, what are the findings of the

investigation;

(d) whether Government are considering seriously the inclusion of doctors and Hospitals—Private or Government into the Consumers' Protection Act; and

(e) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND) : (a) Yes. Sir.

(b) and (c) The findings of enquiry conducted by the Municipal Corporation of Delhi are as under:—

(1) The patient was suffering from Acute Necrotising Pancreatitis with Fatty Infiltration of liver;

(2) He was allergic to Baralgan as per case records;

(3) He died after the injection Analgin was administered;

(4) The Staff Nurse was not aware that the patient, known allergic to Baralgan, will also be allergic to Analgin and she gave injection Analgin with good intention for benefit of the patient to provide him immediate relief due to lack of knowledge and ignorance. Relatives of the patient were pressing hard for doing something to provide relief to the patient.

(5) The words 'and Analgin' was found to have been written on the Casualty Card after the death of the patient by some relative of the deceased when it was known to every body that the deceased was given injection Analgin.

(6) Under the prevailing practice, the Staff Nurses administer sometimes some common injection in good faith when doctor is not available in the ward and patient is serious, to give immediate relief to the patient.

(d) and (e) The services provided by Government hospitals are treated as services rendered free of charge. Therefore, Government hospitals are not covered under the Consumers' Protection Act, 1986.

सरकारी अस्पतालों में "एड्स" के रोगियों हेतु अलग वार्ड

3928. **श्री अनन्त राम जायसवाल** : क्या **स्वास्थ्य और परिवार कल्याण** मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या सरकार को इस तथ्य की जानकारी है कि अधिकतर सरकारी अस्पतालों में "एड्स" के रोगियों हेतु अलग वार्ड की व्यवस्था नहीं है;

(ख) यदि हां, तो क्या सरकार ऐसे रोगियों के लिए अलग वार्ड की व्यवस्था करेगी;

(ग) क्या "एड्स" एक संक्रामक रोग है;

(घ) यदि हां, तो क्या यह सच है कि अस्पतालों में "एड्स" के रोगियों की परिचर्या करने वाले तृतीय और चतुर्थ श्रेणी के कर्मचारियों को संक्रमण से बचाव हेतु कोई सुरक्षा-साधन उपलब्ध नहीं कराए जाते हैं; और

(ङ) यदि हां, तो इसके क्या कारण हैं और यदि नहीं, तो इस संबंध में किए गए उपायों का ब्यौरा क्या है ?

स्वास्थ्य और परिवार कल्याण मंत्री (श्री बी० शंकरानंद) : (क) और (ख) सरकार अस्पतालों में एड्स रोगियों के लिए अलग वार्डों के पक्ष में नहीं है । तथापि जब भी और जहां आवश्यकता होती है एड्स रोगियों को अपेक्षित संस्थानीकृत चिकित्सा परिचर्या प्रदान की जाती है ।

(ग) से (ङ) जी हां, अस्पताली संक्रामणों को नियंत्रित करने के लिए नियत उपायों का निष्ठा से पालन करने के लिए सभी राज्य/संघ राज्य क्षेत्रों को पहले ही अनुदेश जारी किए जा चुके हैं ।

रक्तदाताओं के रक्त में "एड्स" के विषाणु

3929. **श्री अनन्त राम जायसवाल :**
श्री राम गोपाल यादव :

क्या **स्वास्थ्य और परिवार कल्याण** मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या यह सच है कि रक्तदाताओं के रक्त में "एड्स" के विषाणु का पता चलने पर रक्त को तो नष्ट कर दिया जाता है परन्तु रक्तदाताओं को इस तथ्य की सूचना नहीं दी जाती है;

(ख) यदि हां, तो इसके क्या कारण हैं और क्या सरकार इस व्यवस्था को बदलने का विचार रखती है;

(ग) क्या सरकार "एड्स-ग्रस्त" रक्तदाताओं को उनके रक्त में "एड्स" के विषाणु की उपस्थिति के बारे में सूचना देने तथा उनके उपचार की भी व्यवस्था करेगी; और

(घ) यदि हां, तो तत्संबंधी ब्यौरा क्या है और इस संबंध में कोई कार्यवाही कब तक की जाएगी/किए जाने की संभावना है ?

स्वास्थ्य और परिवार कल्याण मंत्री (श्री बी० शंकरानंद) : (क) जी, हां ।

(ख) दान में प्राप्त हुए रक्त के नमूनों का परीक्षण करने का हदाद रक्ताधान के लिए एच०आई०वी०/एड्स और अन्य रक्त संचारी रोगों से मुक्त सुरक्षित रक्त उपलब्ध कराना है । सरकार की नीति रक्त का परीक्षण करना है न कि रक्तदाता का जिसकी एच०आई०वी०/एड्स की दृष्टि से लगने वाले लांछन से बचने के लिए गोपनीयता सुनिश्चित करनी होती है ।